

<b>TRANSMITTAL FORM</b>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 30%;">Application Number</td> <td>10/581,657-Conf. #4969</td> </tr> <tr> <td>Filing Date</td> <td>June 7, 2007</td> </tr> <tr> <td>First Named Inventor</td> <td>David N. Okada</td> </tr> <tr> <td>Art Unit</td> <td>2822</td> </tr> <tr> <td>Examiner Name</td> <td>R. K. Potter</td> </tr> <tr> <td>Attorney Docket Number</td> <td>GWS-005</td> </tr> </table>	Application Number	10/581,657-Conf. #4969	Filing Date	June 7, 2007	First Named Inventor	David N. Okada	Art Unit	2822	Examiner Name	R. K. Potter	Attorney Docket Number	GWS-005
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Examiner Name	R. K. Potter												
Attorney Docket Number	GWS-005												
(to be used for all correspondence after initial filing)													
Total Number of Pages in This Submission													

<b>ENCLOSURES (Check all that apply)</b>		
<input type="checkbox"/> Fee Transmittal Form  <input type="checkbox"/> Fee Attached  <input checked="" type="checkbox"/> Amendment/Reply  <input type="checkbox"/> After Final  <input type="checkbox"/> Affidavits/declaration(s)  <input type="checkbox"/> Extension of Time Request  <input type="checkbox"/> Express Abandonment Request  <input checked="" type="checkbox"/> Supplemental Information Disclosure Statement  <input type="checkbox"/> Certified Copy of Priority Document(s)  <input type="checkbox"/> Reply to Missing Parts/Incomplete Application  <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s)  <input type="checkbox"/> Licensing-related Papers  <input type="checkbox"/> Petition  <input type="checkbox"/> Petition to Convert to a Provisional Application  <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address  <input type="checkbox"/> Terminal Disclaimer  <input type="checkbox"/> Request for Refund  <input type="checkbox"/> CD, Number of CD(s) _____  <input type="checkbox"/> Landscape Table on CD  <div style="border: 1px solid black; padding: 2px; width: fit-content;">Remarks</div>	<input type="checkbox"/> After Allowance Communication to TC  <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences  <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)  <input type="checkbox"/> Proprietary Information  <input type="checkbox"/> Status Letter  <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): - Form PTO/SB/08 citing references A2 - A6

<b>SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT</b>			
Firm Name	GOODWIN PROCTER LLP		
Signature	/Natasha Us/		
Printed name	Natasha Us		
Date	March 28, 2008	Reg. No.	44,381